

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

LOREN MEYERS
DEPUTY ATTORNEY GENERAL
DEPARTMENT OF JUSTICE
820 N. FRENCH STREET
WILMINGTON, DE 19801



COMPLETE THIS SECTION ON DELIVERY

A. Signature

Chris J. St. George

 Agent Addressee

B. Received by (Printed Name)

Chris J. St. George

C. Date of Delivery

APR 16 1980

D. Is delivery address different from item 1?

If YES, enter delivery address below:

 Yes No

PM 2:

6

3. Service Type

 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee)

 Yes

05-164 SLR

2. Article Number

(Transfer from service label)

7002 2030 0003 0326 6365

PS Form 3811, August 2001

Domestic Return Receipt

2ACPRI-03-P-4081

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- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
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1. Article Addressed to:

WARDEN TOM CARROLL
DELAWARE CORRECTIONAL CENTER
1181 PADDOCK RD.
SMYRNA, DE 19977

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Beatrice Drey

 Agent Addressee

B. Received by (Printed Name)

Beatrice Drey 4/10/05

C. Date of Delivery

APR 10 2005

D. Is delivery address different from item 1?

If YES, enter delivery address below:

 Yes No

APR 10 2005

3. Service Type

 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee)

 Yes

2. Article Number

(Transfer from service label)

7002 2030 0003 0326 6358

PS Form 3811, August 2001

Domestic Return Receipt

2ACPRI-03-P-4081